

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Handwritten initials]</i>	<i>7533</i>	
O.I.P.E. CLASSIFIER	<i>[Handwritten initials]</i>	<i>45</i>	<i>3/1</i>
FORMALITY REVIEW	<i>BH</i>	<i>60245</i>	<i>4-4-60</i>
RESPONSE FORMALITY REVIEW		<i>60245</i>	<i>5-30-60</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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